Image# 11971564115 PAGE 1 / 1

## **FEC FORM 2**

## STATEMENT OF CANDIDACY

| 1.   | (a) Name of Candidate (in full)   |                 |              |             |                 |   |                   |  |
|--|---|-----------------|--------------|-------------|-----------------|---|-------------------|--|
|  | Mrs. Karen Harrington (Personal Funds)  |                 |              |             |                 |   |                   |  |
|  | (b) Address (number and street) ☐ Check if add 2000 NW 150th Ave Suite 2120   |                 |              | ss changed  |                 | Candidate's FEC Identification Number     H0FL20070 |                   |  |
|  | (c) City, State, and ZIP Code   |                 |              |             |                 | 3. Is This No                                       |                   |  |
|  | Pembroke Pines  |                 | FL           | 3302        | 8-2870          | Statement (N  | ) <b>OR</b> × (A) |  |
| 4.   | Party Affiliation   | 5. Office Soug  | ht           |             | 6. State & Dist | rict of Candidate                                   |                   |  |
|  | REPUBLICAN PARTY  | House           |              |             | FL              | 20  |                   |  |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE  |   |                 |              |             |                 |   |                   |  |
| 7.   | I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 (year of election) |                 |              |             |                 |   |                   |  |
|  | NOTE: This designation should be filed with the appropriate office listed in the instructions.                                |                 |              |             |                 |   |                   |  |
|  | (a) Name of Committee (in full)   |                 |              |             |                 |   |                   |  |
| Karen Harrington For Congress, Inc.  |   |                 |              |             |                 |   |                   |  |
|  | (b) Address (number and street)   |                 |              |             |                 |   |                   |  |
|  | 2000 NW 150th Ave<br>Suite 2120   |                 |              |             |                 |   |                   |  |
|  | (c) City, State, and ZIP Code   |                 |              |             |                 |   |                   |  |
|  |   |                 |              |             | FL              | 33028   |                   |  |
|  | Pembroke Pines  |                 |              |             | FL              | 33020   |                   |  |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. |   |                 |              |             |                 |   |                   |  |
| NOTE: This designation should be filed with the principal campaign committee.  |   |                 |              |             |                 |   |                   |  |
| (a) Name of Committee (in full)  |   |                 |              |             |                 |   |                   |  |
|  | (a) Hamo or committee (in fair)   |                 |              |             |                 |   |                   |  |
| (b) Address (number and street)  |   |                 |              |             |                 |   |                   |  |
| (c) City, State, and ZIP Code  |   |                 |              |             |                 |   |                   |  |
|  |   |                 |              |             |                 |   |                   |  |
|  |   | mined this Stat | ement and to | the best of | my knowledge a  | nd belief it is true, correct                       | and complete.     |  |
| Si   | gnature of Candidate  |                 |              |             |                 | Date  |                   |  |
| Mrs. Karen Harrington (Personal Funds) [Electronically Filed] 10/12/2  |   |                 |              |             |                 | 10/12/2011  |                   |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.  |   |                 |              |             |                 |   |                   |  |
|  |   |                 |              |             |                 |   |                   |  |
| 1  |   |                 |              |             |                 |   |                   |  |

FEC FORM 2 (REV. 02/2009)